

MINUTES
of the
Mental Health Planning Advisory Council
meeting on
August 5, 2003
held at
United Way of Southern Nevada
Conference Room
1660 E Flamingo Road
Las Vegas, NV 89119

I. CALL TO ORDER, ROLL CALL, INTRODUCTIONS

Alyce Thomas, Chair of the Council, called the meeting to order at 9:30 am.

Members present:

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| • Aitken, Nancy | • Legier, Barbara |
| • Clark, Jerry | • Lovass-Nagy, Chris (for Richard Whitley) |
| • Cooley, Judge W. | • Rodriguez, Jenita |
| • Crowe, Kevin | • Taycher, Karen |
| • Jackson, Barbara | • Thomas, Alyce |
| • Johnson, Rosetta | • Wherry, Mary |

Members absent:

- | | |
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| • Bennett, Bob | • Parra, Debbie |
| • Dopf, Gloria | • Uptergrove, Anna |

Staff and others in attendance:

- | | |
|----------------------------|---|
| • Caloiaro, Dave – MHDS | • Williams, Cozetta – Nevada PEP |
| • Peterson, Christa – DCFS | • Valentine, Laura – MHDS |
| • Triggs, Jonna – MHDS | • Zeiser, Andrew– Administrative Consultant |

II. APPROVAL OF MINUTES FROM PREVIOUS COUNCIL MEETING

Alyce Thomas asked for questions and comments on the minutes from the June 23, 2003, meeting. None were made. She then asked for a motion to approve.

MOTION: Made by Jenita Rodriguez, seconded by Chris Lovass-Nagy, to approve the minutes from the June 23, 2003, meeting as submitted.

UNANIMOUS VOICE VOTE; MOTION CARRIED.

III. PRESENTATION: TRANSITION BETWEEN CHILD AND ADULT SERVICES – CHRISTA PETERSON AND JONNA TRIGGS

Alyce Thomas asked Christa Peterson to begin her presentation. Christa distributed a summary handout on transition services provided by the Division of Child and Family Services (DCFS). She reviewed risk factors identified during transition, highlighting in particular the risks of a youth not completing school or gaining employment. She then discussed barriers to successful transition, along with the guidelines used for transition and desired outcomes.

Christa moved on to review Medicaid eligibility data for children, which was gathered by the Mental Health Consortia. She pointed out the contrast between the number of children served in the 11 to 15 year old range, versus the 16 to 18 year old range, with the latter being significantly lower. Rosetta Johnson asked if there is an explanation for this. Christa said not at this time, but she suggested it may be a data collection problem.

Christa then reviewed a chart of children receiving Medicaid funded mental health services, which again shows a drop off after age 17. This may be due to eligibility issues, but she noted that this is a concern and that the Mental Health Consortia are studying the problem. She went on to review data on children in DCFS custody receiving mental health services. Out of 2,750 in care, only about 4%, or 118, are in State custody. She reviewed a pie chart that shows the level of care needs of the children in custody. She then reviewed a bar graph showing outpatient service levels. She emphasized that although the population is small, their need is high. She concluded by pointing out that only a small percentage of DCFS custody youths require transition to adult services, about 3%. Youths are started into transition when they reach 17 and three-quarter years of age, i.e., three months before they turn 18.

Dave Caloiaro asked about the age group from 18 to 21 years aging out of foster care. He noted that Assembly Bill (AB) 5 or 25 would extend eligibility through age 21 and asked if it was passed during the recent legislative session. Christa said no. Rosetta asked about children with serious emotional disturbance (SED) and how they are classified as such. Christa said they use the definition in Nevada Administrative Code (NAC) 433, which requires a Diagnostic and Statistical Manual of Mental Disorders (DSM) diagnosis along with other criteria. More discussion followed about children at risk of SED, including use of the Child and Adolescent Level of Care Utilization System (CALOCUS) assessment tool, which is an instrument that links clinical assessment with corresponding standardized levels of care. Rosetta asked why so few youth are transitioned to adult services. Christa said that children with SED, as discussed in Surgeon General's Report, have a much better prognosis for recovery.

Dave brought up the integration of child welfare services with Washoe and Clark, and asked how the Counties are addressing transition. Christa said that she cannot speak specifically about Washoe County, but confirmed that Washoe has jurisdiction over children with SED and are

responsible for their transition into adult services. She noted that the Mental Health Consortia are addressing this topic.

Andrew Zeiser agreed with Rosetta that transition numbers seem low, pointing out high teen suicide and depression rates, particularly in Nevada. He noted that perhaps the confusion comes from looking at children with SED versus those at risk of SED, and therefore looking at the contrast between inpatient versus outpatient services. Based on this, he asked about populations for whom referrals might be made, such as youths who may be assessed at a Neighborhood Care Center but not be classified as SED or enter the DCFS system. Are they provided referrals to some source of help? Christa said that Mental Health Consortia are studying needs of this population. She noted that close to 90% of children who enter the DCFS system are classified as SED. However, she agreed that the at-risk population for SED is quite large at about 20% of the public school population in Clark County.

Alyce asked how this problem area will be studied. Christa said teachers and school counselors will take part in an assessment process in conjunction with the Mental Health Consortia. Karen Taycher asked about a prevalence rate to estimate how many children are not being served. Christa said there is a prevalence rate that can be used to calculate unserved children in school populations.

Alyce then asked Jonna Triggs to begin her presentation. Jonna said that Southern Nevada Adult Mental Health Services (SNAMHS) is mandated to provide services only to persons diagnosed with serious mental illness (SMI), and agreed that many at-risk youths served by DCFS may not qualify for service through the Division of Mental Health and Developmental Services (MHDS). The memorandum of understanding (MOU) between DCFS and MHDS was established about 10 years ago and essentially triggers a call to SNAMHS staff when a youth reaches an age of three months before they turn 18, as noted above. SNAMHS primarily works to provide transition to group homes or supported living arrangements (SLAs).

Jonna then brought up Senate Concurrent Resolution (SCR) 3, 4, and 5, all of which were passed during the recent legislative session and focus on the topic of suicide prevention in Clark County. She emphasized that this should help to address the high suicide rate in Nevada. She also discussed medication clinics and other outpatient services that are available, including the Program for Assertive Community Treatment (PACT) Team. The PACT Team is currently budgeted to serve up to 72 clients and has been budgeted for expansion during fiscal year (FY) 2004. SNAMHS will also add about five new Service Coordinators during FY 2004 as well, for a total of almost 30. Service Coordinators typically have caseloads between one to 35 clients. They also have a new Mobile Crisis Team to address intakes at local emergency rooms. She discussed the possibility of placing a Consumer Services Assistant (CSA) with the mobile crisis team. Another CSA will be placed with PACT Team. Rosetta asked if Jonna believes that PACT Team will be able to reach more clients. Jonna said yes.

Mary Wherry asked about client admissions from area emergency rooms and the problem with wait times. Jonna said about 30% of potential clients leave emergency rooms through attrition and the rest are admitted. Mary asked if the Mobile Crisis Team will reduce client diversion to other hospitals. Jonna said Carlos Brandenburg and she are working with area hospitals to

address how these admissions will be handled. Discussion followed about data to be collected regarding this. Jonna said mainly they will measure hospital deflection rates.

Rosetta asked about client readmission rates. Jonna said they are working to identify clients with multiple admissions, who tend to have co-occurring substance abuse problems. Mary asked if the 30% attrition population from emergency rooms is tracked for readmissions. Jonna said yes, but they often leave the hospital prior to being contacted by SNAMHS staff.

Judge Cooley returned to the topic of teen suicide and asked about what is being explored in this area. Jonna asked Christa to address this. Judge Cooley followed up by asking what types of behaviors are being examined related to teen suicide. Christa said that DCFS received a three-year grant as part of the Safe Schools Initiative, which will address students at risk of violent acts. This includes suicide. DCFS will work with the Clark County School District to help plan outreach efforts and provide services, especially through linkages with the Neighborhood Care Centers.

Karen Taycher asked more specifically about how transition is handled between the two Divisions. Jonna said when SNMAHS is contacted by DCFS, an assessment is made to determine what services are needed for the client, i.e., inpatient versus outpatient. Karen asked about other supports in areas such as employment, education, and independent living. Jonna said that when a Service Coordinator is assigned to the case, these things become part of the treatment plan. This may include psychosocial rehabilitation for job coaching and skill building. Jonna emphasized that a treatment plan is developed based on individual needs.

Rosetta asked about parental involvement. Jonna said that sometimes parents are involved, but sometimes not. Rosetta discussed the importance of working with families. Mary noted that confidentiality is an issue based on Health Insurance Portability and Accountability Act (HIPAA) regulations. Alyce agreed and noted that the federal regulations require a release for family involvement in the treatment plan. Discussion followed about confidentiality issues. Karen clarified that parental involvement is prohibited only in cases when a young adult has not signed a release, otherwise, providers can work with the family. Jonna agreed. More discussion followed. Karen pointed out that under the Individuals with Disabilities Education Act (IDEA), the parent still remains involved even after a child turns 18, per federal regulation. Alyce said this is only relative to education, but does not apply to mental health services. Karen said her point is that there are federal laws that contradict. She emphasized the value of family involvement.

Barbara Jackson then talked about the shift that occurs when a child becomes an adult. Typically, the desire for self-responsibility grows, which she believes has pros and cons in terms of mental health issues. She believes it is often a control issue between parents and children that is at the core of these situations. More discussion followed about family involvement in treatment.

Returning to the topic of transition, Karen asked if a client needs work adjustment training whether or not SNAMHS works with Vocational Rehabilitation or if they provide their own services. Jonna said that the psychosocial rehabilitation program at SNAMHS focuses on pre-

job training, then staff works with Vocational Rehabilitation to help clients find employment. Mary asked if Vocational Rehabilitation is responsible for the Job Connect program. Barbara Legier said there are Vocational Rehabilitation counselors placed at the Job Connect offices. More discussion followed. Jonna said that Vocational Rehabilitation staff members are co-located at SNAMHS to work with psychosocial rehabilitation staff to serve clients. Rosetta asked if this is in place in the north as well. Barbara Legier said they used to do this at Northern Nevada Adult Mental Health Services (NNAMHS), but currently they do not.

Alyce then called for the scheduled break.

**** The meeting broke at 10:35 am, then resumed at 10:50 am.*

IV. PRESENTATION: MHDS STRATEGIC PLAN AND NEEDS ASSESSMENT – LAURA VALENTINE

Alyce Thomas asked Laura Valentine to begin. Laura started by discussing the Seclusion and Restraint Training being sponsored by the National Technical Assistance Center (NTAC). She said she reviewed the last MHPAC meeting minutes and wants to address questions brought up about the training. Regarding DCFS participation, she has worked to ensure that two DCFS staff members will be able to take part in the training. Regarding funding for follow-up training, she said that NTAC will be providing a toolkit that will go a long way to help enable follow-up training by staff at their own organizations. More discussion followed about details of the training.

Laura then distributed handouts on the MHDS Needs Assessment and Strategic Plan. She first referred to the Strategic Plan outline, which is from a PowerPoint presentation. She discussed the values clarification study done by MHDS and the planning objectives that resulted from it. MHDS is now working to align the Strategic Plan with legislative activities, the work of the MHDS Commission, and the work of the Council. Also, MHDS is working to tie it into the Needs Assessment. Laura then reviewed the key goals in the Strategic Plan outline:

1. Develop and implement evidence-based treatment and interventions for adults and children.
2. Ensure that the vision, mission, budgets, and service systems meet the expectation of the Olmstead decision in that services and programs are provided in the most normative setting.
3. Ensure that services are consumer-driven in that services address the interests, rights, and needs of each individual consumer (individual served).
4. Utilize technology to improve accessibility to, and availability of, services and the efficient use of resources.
5. Update and maintain a plan to respond to emergencies and disasters in Nevada in a timely and effective manner.
6. Reduce the rate of suicide and riskful behavior in Nevada, which can cause injuries, death, etc.

Laura also brought up the Surgeon General's Report on Mental Illness and the President's New Freedom Commission Report, which both emphasize providing programs based on evidence-based practice. She discussed several grants MHDS has applied for through the Substance Abuse and Mental Health Services Administration (SAMHSA) to support various evidence-based mental health programs. More discussion followed about the types of evidence-based practices being considered.

Laura returned to discussing the goals and objectives from the Strategic Plan. Regarding goal four, the utilization of technology to improve services, she discussed the acquisition of the new Management Information System (MIS) for MHDS. She also emphasized the importance of goal five relative to disaster response, and goal six relative to suicide and other risk behaviors.

Kevin Crowe commented that the reason for presenting this information to the MHPAC is to make the group aware of how MHDS is engaging in planning efforts, to develop advocacy and support for future legislative sessions, and to involve stakeholders. Laura said that this information was also presented to the MHDS Commission to provide a progress report to them.

Mary Wherry commented on the Division of Health Care Financing and Policy (DHCFP)'s work with MHDS on the Medicaid Plan related to provision of mental health services. Kevin asked if Mary would be willing to discuss mental health issues impacted by Medicaid at a future Council meeting. Mary agreed. More discussion followed.

Rosetta Johnson then asked about who contributed to designing the MHDS Strategic Plan. Laura said that feedback was drawn from stakeholders at the community level. Kevin suggested that the Council could also provide feedback on the Strategic Plan to improve consumer involvement.

Laura moved on to discuss the Division's work on the 2004 Needs Assessment. She pointed out that this iteration of the assessment will include both mental health and developmental services needs. They will have specific developmental services data elements collected to contribute to the assessment. Discussion followed about consumer surveys that contribute to the data collection, along with Continuum of Care efforts to assess the needs of homeless populations.

Alyce then called for the scheduled lunch break.

**** The meeting broke at 11:30 am, then resumed at 1:00 pm.*

V. REVIEW FY 2004 CMHS BLOCK GRANT APPLICATION – ANDREW ZEISER

Alyce Thomas asked Andrew Zeiser to begin. Andrew reviewed each section of the grant application draft, explaining the key contents of the application information, state plan context, criteria one through five, and the attachments. Upon reviewing the system of care information for MHDS in criterion one, Dave Caloiaro asked about similar information for DCFS. Andrew explained that the grant is structured such that information for both MHDS and DCFS is

included within each major topic area, and he pointed out the page number where the DCFS system of care information begins.

Upon reviewing the prior funding priority accomplishments in the state plan context, Rosetta Johnson recommended looking at funding a PACT Team in the rural areas. Kevin Crowe said this could be considered when developing future funding priorities. Andrew then explained that the cutoff date for comments from the Council is set for Friday, August 15, 2003. He asked everyone present to please let him know if there are any questions about the content, or if they find any typographical errors or problems in the draft. Alyce asked if there are any additional questions or comments. None were made.

VI. SUBCOMMITTEE UPDATES

Alyce Thomas asked Rosetta Johnson to begin her update on Systems Integration. Rosetta noted that there is a meeting scheduled this Thursday from 1:00 pm to 5:00 pm, to be held immediately following the MHDS Service Coordination Conference. She discussed some of the goals and objectives of the Systems Integration project, and specifically referenced the importance of serving children and seniors. She also mentioned persons with HIV/AIDS, who comprise a special population that requires service across several agencies. She discussed agency reports that will be completed on Systems Integration efforts as part of her pilot project, then reviewed in detail some of the elements that will be included in the reports. Rosetta also discussed the timelines of the project and key target dates for planning, pilot project implementation, project evaluation, and resulting strategies for change within the broader system.

Alyce then asked Kevin Crowe to provide an update on Seclusion and Restraint. Kevin deferred to Laura Valentine. Laura said the training sponsored by NTAC is scheduled for next week, August 13 through 15. She will provide summary information on the training to be distributed to the Council. Laura also discussed the expansion of the training to include other states and other agency representatives, including DCFS. Alyce said the Council would be willing to provide travel support to DCFS staff attendees if needed.

Alyce moved on and asked Dave Caloiaro to review the Request for Proposal (RFP) quarterly reporting requirements and report format for subgrant recipients. Dave distributed a copy of the report format and reminded everyone that it was agreed to make this a requirement for subgrant recipients during the next funding cycle, in order to gather more information on services provided. He reviewed the elements of the quarterly report in detail. He then discussed what would be requested in the annual report, including an in-person presentation to the Council with a written summary of goals, key program elements, and funds expended.

Judge Cooley asked about the section in the report on successes and challenges, and requested that the Council ask subgrant recipients if any future challenges within a program can be foreseen and if technical assistance can be provided. Dave suggested that the successes and challenges could be separated into two items within the report based on Judge Cooley's request. She agreed.

Alyce then asked for additional comments. Kevin asked the group if they believe the report is too much to ask of the subgrantees. Several members said no, they believe this is a reasonable request. Alyce suggested that it will help with billing and understanding changes in budgeted expenditures. She then thanked Dave for his work on the report.

Alyce moved on to discuss the Policy Committee, which will consist of the Executive Committee members, Kevin Crowe as the representative for MHDS, and Jerry Clark as the representative for DCFS. Alyce wants the Committee to start working on MHPAC policies including the definition of a consumer and family member, and more formal monitoring of the State system. She discussed her work on the National Association of Mental Health Planning and Advisory Councils (NAMPHAC) Policy Committee and some of the policies they are working on at the national level. Dave asked if the policy format will be the same as those for State Divisions such as MHDS or DCFS. Alyce said that this structure may be more defined than what is typically done at the national level, so the Council policies may be less formal.

Possible meeting dates for the Policy Committee were discussed and an initial date was set for September 10 at 10:00 am in Carson City. Alyce said Andrew will notice the meeting and work on a draft agenda. New member orientation will be held the day prior on September 9 at a time to be determined.

Alyce moved on to discuss the upcoming Council elections. She said it was initially discussed that nominations would be made from the floor, but a Council member requested that a Nominating Committee be established. Alyce said she decided to bring this issue to the Council for comment. Jenita asked what the Nominating Committee would do. Alyce asked Rosetta to explain what she believes would be done by the Committee. Rosetta said the Nominating Committee usually canvasses the group to determine who wants to run and then works to find out more about the candidates, i.e., learn out about their goals for the group and their qualifications for the position. More discussion followed.

Dave suggested that each candidate might make a presentation to the Council as a whole about their reasons for running, qualifications, and future goals. He said this could be time limited and additional time for questions could be allowed for Council members. Rosetta said she believes this process would give dignity to the responsibilities of the officers.

Judge Cooley confirmed that the question on the floor is whether a Committee is wanted. She then asked Dave about his opinion on this. Dave said he believes there should be a Nominating Committee that can canvass the members as recommended by Rosetta. Dave then set forth a motion to establish a Nominating Committee for election of the Chair and Vice Chair positions.

Barbara Jackson said she is concerned that some consumers might be frightened off by this process. More discussion followed. Andrew suggested a more transparent process by which nominations are made from the floor at the next meeting, rather than through a Nominating Committee, and those interested in running could present brief information on their background. Alyce asked about what information would be requested of the candidates. Dave suggested candidates discuss their past work on the Council, with consumers, or within the mental health system.

Alyce asked for more discussion on Dave's motion. Chris Lovass-Nagy asked again what the Nominating Committee would serve to do. Dave said that he understands that the Committee would canvass members who are interested in running for an office so no candidates are nominated by surprise from the floor.

Rosetta stressed the importance of having subgroups of the Council do targeted work, and she believes the Nominating Committee would promote greater involvement of the Council members and more activity on their part in the business of the Council.

Nancy Aitken said she does not believe there are very many members who want to run for office such that it merits the formality of a Nominating Committee. Kevin commented that what is important to him is knowing who is interested in running. He suggested that Andrew might poll the members to see who is interested and go from there. Kevin agreed with Barbara that members should not be discouraged from the process.

Nancy reiterated that a Nominating Committee could complicate things, and the Council is a small enough group that can allow members to speak for themselves about their qualifications. Alyce confirmed that the Council desires to hear from candidates about their experience regardless of the process. The members agreed.

Judge Cooley said that if the election process is going to be an open forum, a specific group should not be established that might exclude some members. She believes that a Nominating Committee might divide the Council. Based on this, Judge Cooley made a motion to not establish Nominating Committee and allow the Council to accept nominations from the floor. Alyce reminded everyone present that Dave's motion was not seconded. She asked if there is a second for Judge Cooley's motion. Barbara Legier seconded the motion. Alyce asked for further discussion and no additional comments were made. She then called for a vote.

MOTION: Made by Judge Cooley, seconded by Barbara Legier, to not establish a Nominating Committee for the October elections and allow the Council to accept nominations from the floor.

MAJORITY VOICE VOTE; MOTION CARRIED.

OPPOSED: Rosetta Johnson.

ABSTENTIONS: None.

Alyce reminded everyone that it is the consensus of the Council that candidates be prepared to speak briefly about themselves and their background upon nomination. Brief discussion followed.

VII. EXECUTIVE REPORT – ALYCE THOMAS

Alyce Thomas brought up the Canteen at NNAMHS and explained that the expenditure details were worked out such that \$1,200 will be reverted, which is the amount not to be expended on computers per the Council's direction at the last meeting. Alyce suggested that this money be used to help support clients' attendance at group activities through the Consumer Assistance Program (CAP) in the north and south.

Rosetta Johnson asked who will control the use of this money. Alyce said the money will come back to the Council, and therefore its use can be determined by the Council as a whole or the Executive Committee. Alyce reiterated that she would like to use the reverted funds for client outings in north and south through the psychosocial rehabilitation (PSR) program and the CAP. She then discussed in detail how the funds might be used to fund consumer activities. More discussion followed.

Nancy Aitken then made a motion to use the \$1,200 for consumer activities at the direction of the Chair. Alyce asked for more discussion and no additional comments were made. She then called for a vote.

MOTION: Made by Nancy Aitken, seconded by Judge Cooley, to expend the \$1,200 to be reverted by the Canteen at NNAMHS on consumer activities in the north and south through the PSR and CAP programs.

UNANIMOUS VOICE VOTE; MOTION CARRIED.

Alyce moved on to discuss follow-up on the computer lab at NNAMHS. She distributed copies of the letter sent to Dave Proffitt and reviewed the matter in detail, explaining that it was requested that the lab be put under the direction of the CAP in order to improve consumer access to the computers and ensure they are maintained properly. Alyce asked Kevin to help work with staff at NNAMHS to get computers up and running again. Alyce asked Rosetta and Andrew to conduct a monitoring visit to follow up on the progress of these changes in October.

VIII. NEW BUSINESS

Alyce Thomas discussed a consumer conference being planned for May, 2004, which will be sponsored by a variety of groups and is being planned by the CAP staff. She said a letter will be written to ask the Council to lend administrative support for the development of the conference with Andrew Zeiser's help. Alyce then discussed several of the conference collaborators, including the Nevada Health Division, A Rainbow Place, Johnson and Johnson, the Federation of Families, and others. She is requesting that the Council collaborate on the project by lending administrative support. She would like the Executive Committee to make the decision about allowing Andrew's support, because the matter cannot be voted on at this meeting as it was not noticed on the agenda. However, she would like to know if the Council members support this idea. Jenita Rodriguez and Judge Cooley commented that they support the idea.

IX. PUBLIC COMMENT

Comments by public attendees were made under the agenda items above.

X. SET DATE, TIME, LOCATION, AND TOPICS FOR NEXT MEETING(S)

Alyce Thomas reminded everyone that the next meeting will be held in October, but would like to allow the date to be determined. Discussion followed about possible dates. Alyce asked Andrew Zeiser poll the Council member via e-mail and then determine the date based on the members' availability.

XI. ADJOURNMENT

The meeting was adjourned at 2:50 pm.